Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE ond to a collection of information unless it displays a valid OMB con PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Filing Date 10/517 937

Substitute for Form PTO-875							10/317,337		12/13/2003		10 be walled
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL	ENTITY 🗌	OR		HER THAN ALL ENTITY
	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1,16(a), (b), or (c))		N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i), or (m))		N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),	iE or (q))	N/A		N/A		N/A		1	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =			1	x s =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 = *			1	x \$ =			X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
	MULTIPLE DEPEN	IDENT CLAIM P	RESENT (3	7 CFR 1.16(j))]]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		1	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY				
MENT	01/24/2011	CLAIMS REMAINING AFTER		HIGHEST NUMBER	PRESENT	1	RATE (\$)	ADDITIONAL	П		ADDITIONAL
		AMENDMENT		PREVIOUSLY PAID FOR	EXTRA		HATE (5)	FEE (\$)		RATE (\$)	FEE (\$)
≥	Total (37 CFR 1.16(ii)		Minus		= 0		X \$ =	FEE (\$)	OR	RATE (\$) X \$52=	
NON	Total (37 CFR 1.16(i)) Independent (37 CFR 1.16(h))	AMENDMENT	_	PAID FOR				FEE (\$)	OR		FEE (\$)
AMENDMENT	1.16(i)) Independent (37 CFR 1.16(h))	- 42	Minus	PAID FOR	= 0		x s =	FEE (\$)	-	X \$52=	FEE (\$)
AMENDM	independent (37 CFR 1.16(h)) Application S	* 42 * 5 ze Fee (37 CFR	Minus Minus 1.16(s))	PAID FOR	= 0		x s =	FEE (\$)	-	X \$52=	FEE (\$)
AMENDM	independent (37 CFR 1.16(h)) Application S	* 42 * 5 ze Fee (37 CFR	Minus Minus 1.16(s))	PAID FOR 44 5	= 0		x s =	FEE (\$)	OR	X \$52=	FEE (\$)
AMENDM	independent (37 CFR 1.16(h)) Application S	- 42 - 5 ize Fee (37 CFR withtion of Multi	Minus Minus 1.16(s))	PAID FOR 44 5 IDENT CLAIM (37 CFI	= 0		X \$ = X \$ =	FEE (\$)	OR	X \$52= X \$220= TOTAL ADD'L	0 0
	1.16(0) Independent (37 CFR 1.16(h)) Application S FIRST PRESEN	- 42 - 5 ize Fee (37 CFR	Minus Minus 1.16(s))	PAID FOR 445	= 0 = 0		X \$ = X \$ =	ADDITIONAL FEE (\$)	OR	X \$52= X \$220= TOTAL ADD'L	0 0
	1.16(ii) Independent (37.0FR 1.16(ii)) Application S I FIRST PRESEN Total (37.0FR 1.16(ii))	- 42 - 5 ize Fee (37 CFR with a control of Multi- (Column 1) CLAIMS REMAINING AFTER	Minus Minus 1.16(s))	PAID FOR	= 0 = 0 R1.16(ji) (Column 3) PRESENT		X S = X S = TOTAL ADD'L FEE	ADDITIONAL	OR	X \$52= X \$220= TOTAL ADD'L FEE	FEE (\$) 0 0 0 ADDITIONAL
NDMENT AMENDM		- 42 - 5 - 5 - 5 - 5 - 5 - 12 - Fee (37 CFR WITATION OF MULT (Column 1) - CLAIMS REMAINING AFTER AMENDMENT	Minus Minus 1.16(s))	PAID FOR	= 0 = 0 = 1.16(j) (Column 3) PRESENT EXTRA		X \$ = X \$ = TOTAL ADD'L FEE RATE (\$)	ADDITIONAL	OR OR	X \$52# X \$220= TOTAL ADD'L FEE RATE (\$)	FEE (\$) 0 0 0 ADDITIONAL

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i))

ADD'L

FEE

OR

OR ADD'L

FEE

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

Legal Instrument Examiner: /MARQUITA D. JONES/